

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL026026	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED R 01/21/2016
NAME OF PROVIDER OR SUPPLIER RIVERSTONE		STREET ADDRESS, CITY, STATE, ZIP CODE 104 EFIRD BOULEVARD NEW BERN, NC 28562		
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(C 000)	Initial Comments Report of Follow-up Survey by Frank Strickland and Billy Bryant on 01/21/2016: Some cited deficiencies have been field verified for correction. However, a majority of the cited deficiencies have not been corrected and require corrective action. A new Plan of Correction is required.	(C 000)	a. The facility maintenance and housekeeping are working to clean and strip the floors, so that they are free from dirt/wax buildup around the door frames, where the floors meet the walls at the vinyl base, and in the doorways.	3/4/16
(C 164)	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the floors clean and in good repair. Findings include: a- Throughout the facility, there is wax/ dirt build-up around the door frames, where the floors meet the walls at the vinyl base, and in the doorways. b- There is a large area of stained floor tiles in the Activity Room. c- The floor tiles in the Beauty Shop are broken, cracked, and discolored. d- The floor tiles at the fire doors (both halls) are cracked. 2- Based on observations, the facility has failed to	(C 164)	b. The facility maintenance team has ordered replacement tile and have repaired the stained floor tiles in the activity room. c. The facility maintenance team has ordered replacement tile and have repaired the broken, cracked and discolored floor tiles. d. The facility maintenance team has ordered replacement floor tiles and have repaired the cracked tiles at the fire doors. 2. a. The facility housekeeping staff has thoroughly cleaned the walls in the beauty shop. The facility maintenance staff will paint the stained walls in the beauty shop.	3/4/16

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

Michele J. Sinclair

STATE FORM

400

TITLE
Administrator

4LV022

(X6) DATE

2/22/16

If continuation sheet 1 of 7

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(C 164)	<p>Continued From page 1</p> <p>maintain the walls clean and in good repair.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- In the Beauty Shop, one of the walls is dirty or stained. b- There is a pattern of torn or ragged wallcovering throughout the facility. Specific examples include but are not limited to: <ul style="list-style-type: none"> 1- Shower Room 6. 2- Resident Room 129 3- Resident Room 128 c- The walls in the bathroom of Resident Room 110 are damaged and in need of repair. d- One of the walls in the bathroom of Resident Room 103 has a hole in it. e- The wall located at the bed in Resident Room 127 is spattered and badly stained. f- The grout in the tile of Shower Room 2 is dirty and appears to be growing mildew. g- The grout is missing in the shower of Bathing Room 1. <p>3- Based on observations, the facility has failed to maintain the facility's furniture in a clean and maintained manner.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- The mattress in Resident Room 115 is torn and in bad repair. b- The box springs and bed in Resident Room 129 are broken and the mattress is in bad repair. 	(C 164)	<p>b. The facility maintenance team has purchased wall paper glue 3/4/16 and is repairing the torn and ragged wallcovering throughout the facility. Including areas Shower room 6, resident room 129 and resident room 126.</p> <p>c. The facility maintenance team has repaired the walls in the bathroom of resident room 110.</p> <p>d. The facility maintenance team 3/4/16 has repaired the hole in the wall in resident room 103.</p> <p>e. The facility housekeeping staff have cleaned the walls in room 127. The facility maintenance staff will paint the walls in resident room 127.</p> <p>f. The facility housekeeping staff have cleaned the grout in the tile of Shower Room 2. 2/23/16</p> <p>g. The facility maintenance team has purchased grout and will be 3/4/16 replacing the missing grout in the shower of Bathing Room 1.</p>	
(C 166)	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0308 HOUSEKEEPING AND FURNISHINGS	(C 166)	<p>3.</p> <p>a. The mattress in resident room 115 has been replaced.</p> <p>b. The mattress and box spring in resident room 129 has been replaced.</p>	2/9/16

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(C 166)	<p>Continued From page 2</p> <p>(a) Adult care homes shall:</p> <p>(5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards;</p> <p>(e) This Rule shall apply to new and existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1- Based on observation, the facility has failed to keep the building and its environment clean and maintained.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- In the kitchen, there is a metal shelving unit that is severely rusted. c- In the Staff Breakroom, the wood base moulding has splintered and has rough edges exposed. d- The corridor door to the Staff Breakroom is delaminating. <p>2- Based on observations, the facility has failed to maintain the building free of hazards.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- In Room 127, the door on an overhead cabinet is falling off the hinges. b- In Shower Room 1, the grab bar beside the commode is loose at the wall. c- The exterior light at the EXIT door near Room 116 is not working. d- In the Resident Care Coordinator's office, there is an electrical extension device that is not equipped with overload protection. e- There are items being stored in front of the electrical panel in the Old Med Room. f- In the Corridor, the plumbing clean-outs are approximately ½-3/4 inches below the floor level. 	(C 166)	<p>1. a. The facility maintenance team has repaired and painted the metal shelving unit in the kitchen. 3/4/16</p> <p>c. The facility maintenance team has replaced the wood base molding that was splintered and had rough edges exposed in the staff breakroom. 3/4/16</p> <p>d. The facility maintenance team has repaired the corridor door to the staff breakroom. 3/4/16</p> <p>2. a. The facility maintenance team has repaired the overhead cabinet in room 127. 2/9/16</p> <p>b. The facility maintenance team has tightened and secured the grab bar beside the commode in shower room 1. 2/9/16</p> <p>c. The facility maintenance team has repaired the exterior light at the exit door near Room 116. 2/9/16</p> <p>d. The facility maintenance team has provided an overload protection device to the electrical extension device in the Resident Care Coordinators office. 2/23/16</p> <p>e. The facility housekeeping staff has removed the items that were being stored in front of the electrical panel in the Old Med Room. 2/23/16</p>	

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(C 166)	Continued From page 3 providing a trip hazard. g- There are oxygen bottles located in the following areas that are either not stored in containers or in containers that do not provide proper support to prevent them from falling over. Locations to include but not limited to: 3- Oxygen Storage Room h- The grab bar located in Shower Room 6 is loose.	(C 166)	g. The Resident Care Coordinator has removed all oxygen bottles that were not properly stored and had them picked up by the company. h. The facility maintenance team has tightened and secured the grab bar located in Shower Room 6.	2/23/16
(C 189)	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1- Based on observations, plumbing systems are not maintained safe and operating. These deficiencies may affect residents, staff, or visitors who may have to use these facilities. Findings on include: a- The toilet located in the Sanitation Room is not functioning, has no water, is severely stained, and is not equipped with a toilet seat. b- The commode in the Toilet Room beside the Sanitation is soiled and will not flush. c- The commodes in the following rooms are loose at the connection to the floor and water is	(C 189)	1.a. The housekeeping staff have cleaned the Sanitation Room and ensured it is in toilet and ensured it is in working condition. The facility maintenance team purchased and place a toilet on the toilet in the Sanitation Room. b. The facility housekeeping staff has cleaned the commode in the Toilet room. The facility maintenance team has made sure that the commode in the Toilet room is operational. c. The facility maintenance team ensured and repaired the commodes that were loose at the connection to the floor in Resident room 1s and shower Room 3.	2/23/16 2/23/16 2/23/16

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(C 188)	<p>Continued From page 4</p> <p>evident around the base. Locations include but are not limited to:</p> <ul style="list-style-type: none"> 1- Resident Room 115 2- Shower Room 3 d- The water cooler located beside the drink machines does not work <p>2- Based on observations, electrical systems are not maintained safe and operating. These deficiencies may affect residents, staff, or visitors who may work, occupy, or visit the facility.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- The ceiling mounted fluorescent light fixture in the Laundry has no tubes. b- In the 100 Hall Med Room, the following items were noted. To include, but not limited to: <ul style="list-style-type: none"> 2- The wall sconce light has no globe. c- The 100 Hall Utility Room light does not work. e- In Room 131, the ceiling mounted light fixture has no cover. <p>3- Based on observations, fire safety systems are not maintained safe and operating. These deficiencies may affect residents, staff, or visitors who live, work, or visit the facility.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- The emergency lights located in the following areas do not work on battery power. Locations include but are not limited to: <ul style="list-style-type: none"> 1- Activity Room 2- Living Room b- The screws are pulling out of the door/closer on the Central Hall EXIT door, making the door difficult to open in the event of an emergency. 4- Based on observations, the facility failed to 		<p>(C 188)</p> <p>d. The facility maintenance team has repaired the water cooler beside the drink machines.</p> <p>2a. The facility maintenance team have placed tubes in the fluorescent light fixture in the laundry room.</p> <p>b. The facility maintenance team has purchased globes for all the wall sconce lights without globes.</p> <p>c. The facility maintenance team has repaired the 100 Hall Utility Room light.</p> <p>e. The facility maintenance team has replaced the missing cover on the ceiling mounted light fixture in Room 131.</p> <p>3a. The facility maintenance team has replaced the emergency lights in the Activity room and the Living Room.</p> <p>b. The facility maintenance team have repaired the door opener/closer on the Central Hall exit to ensure that it works properly in the event of an emergency.</p> <p>4a. The facility maintenance team have repaired the open crack in the ceiling of Room 113.</p>	

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(C 189)	<p>Continued From page 5</p> <p>ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin.</p> <p>Findings on include:</p> <ul style="list-style-type: none"> a- There are unprotected penetrations in the following locations to include but not limited to: b- There is a large, open crack in the ceiling of Room 113. c- The corridor door to the Utility Closet (located beside the Med Room) is cracked and broken, possibly degrading the fire-resistant rating of the door. 	(C 189)	<p>b. The facility maintenance team has repaired the Utility Closet door in the corridor beside the med room.</p>	2/9/16
(C 190)	<p>Exhaust Ventilation</p> <p>SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS</p> <p>(g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces:</p> <ol style="list-style-type: none"> (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1- Based on observations and testing, the facility</p>	(C 190)		

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(C 199)	<p>Continued From page 6</p> <p>has failed to maintain the mechanical exhaust systems in working condition.</p> <p>Findings include:</p> <ul style="list-style-type: none"> a- The exhaust fan grille in the Laundry Room is completely clogged with lint. b- There are cleaning chemicals being stored in the Old Med Room however there is no mechanical exhaust. 	(C 199)	<p>1. a- The facility housekeeping has 2/23/16 cleaned the exhaust fan grille in the laundry room and will check it weekly to ensure it is kept lint-free.</p> <p>b. The facility housekeeping has 2/23/16 removed all cleaning chemicals to well ventilated area for storage.</p> <p>The facility housekeeping and maintenance staff will review all above cited areas and monitor on a weekly and monthly basis to ensure that the deficient areas remain deficiency free and that there are no life safety issues that would potentially affect residents, visitors or staff.</p> <p>The Administrator will review all cited areas monthly and 3/4/16 as needed to ensure that the facility remains deficiency free.</p>	

In the above cited areas.